

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MD</i>	<i>70891</i>	<i>6/28</i>
O.I.P.E. CLASSIFIER		<i>43</i>	<i>7/3/00</i>
FORMALITY REVIEW	<i>HA</i>	<i>69946</i>	<i>8/21/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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50	✓

Claim	Date
Final Original	
51	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy